



MISSOURI DEPARTMENT OF HEALTH  
STATE PUBLIC HEALTH LABORATORY  
**DATAMASTER MAINTENANCE REPORT**

BREATH ALCOHOL PROGRAM

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN <u>201222</u>	OHSS S <u>06-02-2009</u>	DATE OF INSPECTION <u>0712</u>
LOCATION OF INSTRUMENT (STREET AND CITY) <u>CPD 205 N. CHESTNUT, CAMDEN MO 64429</u>		TIME OF INSPECTION <u>0712</u>

**CHECKLIST:** Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	
<input checked="" type="checkbox"/> COMPUTER <u>OK</u>	<input checked="" type="checkbox"/> DETECTOR <u>OK</u>
<input checked="" type="checkbox"/> PROGRAM <u>OK</u>	<input checked="" type="checkbox"/> FILTERS <u>OK</u>
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER <u>49 °C OK</u>	<input checked="" type="checkbox"/> QUARTZ STANDARD <u>OK</u>
<input checked="" type="checkbox"/> FLOW DETECTOR <u>OK</u>	<input checked="" type="checkbox"/> CALIBRATION <u>OK</u>
<input checked="" type="checkbox"/> PUMP HIGH SPEED <u>OK</u>	<input checked="" type="checkbox"/> PRINTER <u>OK</u>
<input checked="" type="checkbox"/> INDICATOR LIGHTS <u>OK</u>	
<input checked="" type="checkbox"/> TIME AND DATE <u>OK</u>	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34 °C ± 0.2°C) <u>OK</u>	
<input checked="" type="checkbox"/> CALIBRATION CHECK - Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP) <input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE <input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE <b>(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)</b>	

TEST 1 <u>.096</u>	TEST 2 <u>.096</u>	TEST 3 <u>.096</u>
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<input checked="" type="checkbox"/> PERFORM R.F.I. TEST (PRINTOUT ATTACHED) <u>YES</u>						
<input checked="" type="checkbox"/> NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)						
REFUSALS <u>1</u>	(0-.04) <u>5</u>	(.05-.09) <u>0</u>	(.10-.14) <u>0</u>	(.15-.19) <u>0</u>	(Over .19) <u>0</u>	

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

TESTED AND CERTIFIED WITHIN D.OH REQUIREMENTS

GUTH LABS .10% EXPZRS 10-15-09

<b>INSPECTING OFFICER</b>	
SIGNATURE <u>CPL. STEVENSON #110</u>	PRINT NAME <u>CPL. STEVENSON #110</u>
TYPE II PERMIT NUMBER/EXPIRATION DATE <u>720180 108-27-09</u>	TELEPHONE NUMBER <u>(816) 632-6521</u>



## GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **08340** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1211** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **October 15, 2009** at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
CAMERON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201222  
06/02/09  
07:11

## --- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM:	OKAY
HEATERS:	
SAMPLE CHAMBER:	49c
FLOW DETECTOR:	OKAY
PUMP:	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

## PRINTER TEST

!"#\$%&'()\*+,-./0123456789:;<=/?@ABCDEF0  
HIJKLMNOPQRSTUVWXYZ[\]^\_`abcdefg h i j k l m n o  
p q r s t u v w x y z { | } ~

Operator Signature

Face This Side Down - This Edge In First

## BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
CAMERON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201222  
06/02/09

TESTING OFFICER:  
STEVENSON/SHANE/T  
OFFICER I.D.: 110  
PERMIT NUMBER: 720100  
EXPIRATION DATE: 08/27/09  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	00:00
INTERNAL STANDARD	VERIFIED	00:00
EXTERNAL STANDARD	.006	00:00
BLANK TEST	.000	00:01
EXTERNAL STANDARD	.006	00:01
BLANK TEST	.000	00:02
EXTERNAL STANDARD	.006	00:02
BLANK TEST	.000	00:03

N = 3  
SD = .1  
AVG = .006

Operator Signature

Face This Side Down - This Edge In First

## BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
CAMERON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201222  
06/02/09

ARREST TIME: 06:50  
SUBJECT NAME:  
RADIO-FREQUENCY/TEST  
DOB: 01/01/01 SEX: M  
STATE/D.L.: NA/NA  
ARRESTING OFFICER:  
NA

OFFICER I.D.: NA  
TESTING OFFICER:  
STEVENSON/SHANE/T  
OFFICER I.D.: 110  
PERMIT NUMBER: 720100  
EXPIRATION DATE: 08/27/09  
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	07:15
INTERNAL STANDARD	VERIFIED	07:15
RADIO INTERFERENCE		

Operator Signature

State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



SHANE T. STEVENSON


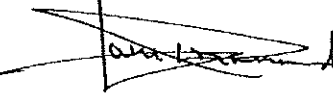
is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

**DATAMASTER**

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 08/27/07  
Number **720180**  
Expires 08/27/2009

MO 580-0771 (7-88)

  
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Director of State Public Health Laboratory  
  
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Director, Department of Health

Lab. 4 (R7-88)